

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Petition for Early
Termination of Probation of:**

MALINI BHARADVAJ MADANAHALLI, M.D.)

Case No. 800-2017-032118

**Physician's and Surgeon's
Certificate No. A63947**

OAH No. 2018120268

Respondent

DECISION

**The attached Proposed Decision is hereby adopted as the Decision and
Order of the Medical Board of California, Department of Consumer Affairs,
State of California.**

This Decision shall become effective at 5:00 p.m. on April 26, 2019.

IT IS SO ORDERED March 28, 2019.

MEDICAL BOARD OF CALIFORNIA

By:



**Kristina Lawson, JD, Chair
Panel B**

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Petition for Early
Termination of Probation of:

MALINI B. MADANAHALLI, M.D.,

Physician's and Surgeon's Certificate
No. A 63947,

Petitioner.

Case No. 800-2017-032118

OAH No. 2018120268

PROPOSED DECISION

Administrative Law Judge Diane Schneider, State of California, Office of Administrative Hearings, heard this matter on January 22, 2019, in Oakland, California.

Petitioner Malini B. Madanahalli, M.D., was present and was represented by Bradford J. Hinshaw, Attorney at Law, Hinshaw, Marsh, Still & Hinshaw LLP.

The Department of Justice, Office of the Attorney General, was represented by Brenda P. Reyes, Deputy Attorney General, pursuant to Government Code section 11522.

The record closed and the matter was submitted for decision on January 22, 2019.

FACTUAL FINDINGS

Background to the filing of the petition

1. On November 21, 1997, the Medical Board of California (Board) issued Physician's and Surgeon's Certificate (Certificate) No. A 63947 to Malini B. Madanahalli, M.D. Petitioner's Certificate was renewed through January 31, 2019.¹ Petitioner also holds controlled substance registration certificate BM6098431; the certificate was issued on January 26, 2017, and expires on January 31, 2020.

¹ No evidence was presented regarding her license status as of February 1, 2019.

2. Pursuant to a stipulated settlement in disciplinary matter No. 03-2013-232777, the Board issued a Decision and Order, effective February 20, 2015, revoking petitioner's Certificate, staying the revocation, and placing petitioner's Certificate on probation for five years, on various terms and conditions. The estimated date that petitioner will complete probation is February 20, 2020.

3. The circumstances underlying petitioner's discipline are that on November 15, 2013, in the Superior Court of the State of California, County of Santa Clara, petitioner was convicted of violating Vehicle Code section 23152, subdivision (b) (driving with a blood alcohol content of 0.08 percent or more), a misdemeanor. The crime occurred on May 28, 2013, when respondent drove her car with a blood alcohol level of 0.23 percent. At the time of her offense, six children were passengers in her car. Respondent was sentenced to four years of formal probation, on various terms and conditions.

4. On April 18, 2017, petitioner signed a Petition for Penalty Relief, and this hearing followed.

Petitioner's evidence

5. Credibility finding: Petitioner's testimony regarding the circumstances underlying her alcohol abuse and her recovery efforts, was forthright and credible in all respects.

6. Alcohol abuse and domestic violence: Petitioner was drinking heavily for about 18 months prior to the May 2013 offense. In late 2012, she reached out to a therapist in order to understand why she was abusing alcohol and feeling depressed. She realized that she was drinking in order to cope with being physically² and emotionally abused by her husband. (Petitioner is separated from her husband; they are in the process of divorcing.) In February 2013, petitioner took a leave from work because she believed that her alcohol abuse impaired her ability to safely care for her patients. After her DUI offense, she became determined to stop self-medicating with alcohol.

7. Recovery programs, addiction evaluation, and testing: Petitioner's sobriety date is July 6, 2013. Petitioner has engaged in a variety of activities to understand her alcohol abuse and maintain her sobriety. Petitioner obtained an evaluation from Jerry Calloway, M.D., an addiction specialist. At Dr. Calloway's suggestion, petitioner submitted to urine testing two times per month; she tested between August 2013, and February 2015. (In February 2015, petitioner continued biological fluid testing through her probation to the Board.) Petitioner began attending Alcoholics Anonymous (AA) meetings, where she gained tremendous support. With her sponsor's help, she realized that she is not alone. Attending AA meetings also helped her take responsibility for her mistakes and make amends for them. Petitioner started "working the steps" and later became involved with helping out at

² A psychiatric report dated March 16, 2015, by Manuj Nangia, M.D., notes that the nature and extent of the physical abuse escalated over time.

meetings. Petitioner is committed to lending support to other professional women who are alcoholics. She became a sponsor in July 2015, which further solidified her recovery. In the two years following her sobriety date, petitioner attended one AA meeting per day. She currently attends three to four AA meetings each week. Additionally, about 18 months ago, petitioner began attending one Al-Anon meeting each week. These meetings have helped petitioner be a better parent to her young adult sons, who are 19 and 22 years old.

8. Petitioner also completed a 30-day residential rehabilitation program on February 15, 2014. This program solidified petitioner's recovery and her commitment to her sobriety in that it helped her realize that she cannot consume any alcohol for the rest of her life.

9. Petitioner has been sober over five and one-half years and no longer has the urge to consume alcohol. She has gained insights into her reasons for turning to alcohol and now realizes that consuming alcohol cannot fix problems. Petitioner currently derives support from attending AA meetings, her AA sponsor, the "posse" of women she met through AA, and other friends outside of AA. She believes that she is rehabilitated, safe to practice medicine, and is a better physician for having gone through the rehabilitation process.

10. Therapy: Petitioner began individual therapy³ in October 2013 with a licensed marriage and family therapist (L.M.F.T.) After her therapist left the area, she began therapy with Tricia J. Mlnarik, L.M.F.T. Petitioner currently attends weekly therapy sessions. Petitioner has found therapy helpful in that it addresses the trauma from her abusive marriage and helps her take care of her needs and maintain her sobriety. In a letter dated January 5, 2019, Mlnarik opines that petitioner:

... actively seeks support and utilizes healthy coping strategies to manage stressful life events and interpersonal conflicts. She has gained insight into the factors contributing to her past alcohol use and has addressed those problems with honesty and courage.

11. Compliance with Superior Court criminal probation: On November 15, 2013, following her no contest plea to driving under the influence of alcohol, the court placed petitioner on formal probation for four years, on terms that required her to complete a nine-month driving under the influence (DUI) first offender program, a residential substance abuse program, and a 52-week parenting program; and also required her to pay various fines and fees. Petitioner complied with each of these probation conditions.

³ Petitioner's therapy with the L.M.F.T.'s was in addition to the therapy required by the Board.

12. On November 18, 2016, the court modified respondent's formal probation to court probation. In a letter to the court in support of petitioner, Deputy Probation Officer James Manning confirmed that petitioner completed the first offender program on November 6, 2014; she completed a residential treatment program on February 14, 2014; and she completed a 52-week parenting program on March 11, 2015. Probation Officer Manning also noted that petitioner had not committed any additional crimes, reported for office appointments as directed, and made regular payments on her fines and fees.⁴

13. Compliance with Board's probation conditions: Pursuant to the Board's Decision and Order, petitioner was required, among other things, to abstain from the use of controlled substances and alcohol; submit to random biological fluid testing; complete a clinical training program equivalent to the Physician Assessment and Clinical Education Program (PACE) offered at the University of California, San Diego School of Medicine; complete a course in professionalism; and receive psychotherapy treatment from a board-certified psychiatrist or a licensed psychologist for a period to be determined by the Board.

14. Petitioner has complied with each of these conditions. The results of petitioner's biological fluid testing have been negative. She completed PACE. In a PACE report dated November 18, 2014,⁵ petitioner passed in Category 1, which the report noted "[s]ignifies a good to excellent performance in most or all areas measured and is consistent with safe practice and competency."

15. Petitioner was evaluated by psychiatrist Dr. Nangia on March 16, 2015, and thereafter, met with him every three months, as required by the Board's Probation Unit. On September 29, 2016, petitioner was notified by the Board's Probation Unit that Dr. Nangia opined that petitioner was able to safely practice medicine and did not need therapy. As a result of Dr. Nangia's recommendation, this requirement was terminated.

16. Petitioner submitted proof that she completed a professionalism course. Petitioner has paid all financial obligations associated with her probation.

17. Current medical practice and continuing education: Petitioner is currently the Assistant Chief of Geriatrics at Santa Clara Valley Medical Center (SCVMC) in San Jose, a position that she also held from September 2005 until February 2013. Petitioner took an extended leave of absence from work between February 2013 and February 2015. She stopped working because she felt that she could not safely treat her patients due to her

⁴ In the absence of evidence to the contrary, it is presumed that petitioner completed the terms of her criminal probation in November 2017.

⁵ Petitioner completed PACE in November 2014, which was about three months prior to the effective date of the Board's Decision and Order.

alcohol abuse, and she remained off work to concentrate on her sobriety. Petitioner worked 20 hours per week until October 2018 in order to provide herself with additional time to focus on her rehabilitation. She currently works 32 hours per week.

18. Petitioner is highly regarded by her supervisors and colleagues. Nirmala Gopalan, M.D., is the Site Medical Director in Geriatrics at SCVMC and has known petitioner for 13 years. In letters dated March 15, 2017, and January 3, 2019, Dr. Gopalan describes petitioner as an outstanding physician who is well-respected by her colleagues and beloved by her patients. In supporting petitioner's request for early termination of probation, Dr. Gopalan also writes that she is impressed by petitioner's honesty regarding her past mistakes, as well as her motivation to restore herself, both personally and professionally. Thomas Wentzien, D.O., is the President of the Medical Staff, Chairman of the Department of Medicine, and Associate Chief of the Division of Cardiology at SCVMC. In a letter dated March 10, 2017, Dr. Wentzien expresses his support of petitioner's request to terminate her probation:

I can say first hand that Dr. Malini Madanahalli has fulfilled every requirement and has been an esteemed colleague and member of our Medical Staff while serving out this probation. Her work has been excellent, and her attendance has been without fail. She is prompt and on time to all of her appointments and receives praise from her patients and staff for the work she does. It has been evident that she has turned her life around and has become a very responsible and dependable member of our Medical Staff.

In a letter dated February 10, 2016, from Phuong Nguyen, M.D., petitioner was informed that she successfully completed her initial Focused Professional Practice Evaluation at SCVMC.

19. Petitioner submitted proof that she completed continuing medical education courses.

20. Petitioner is eager to terminate her probation because it will allow her to treat a broader range of patients, supervise physician's assistants, and engage in teaching, which is one of her passions. If petitioner returns to work on a full-time basis, she will continue her rehabilitative activities. In her words, "I look forward to continuing to grow and be of service, both as a provider in my medical practice and in life as a responsible citizen."

LEGAL CONCLUSIONS

1. In a proceeding for penalty relief it is petitioner's burden to demonstrate, by clear and convincing evidence, that she is rehabilitated and is entitled to the penalty relief requested. (See *Flanzer v. Board of Dental Examiners* (1990) 220 Cal.App.3d 1392, 1398; *Houseman v. Board of Medical Examiners* (1948) 84 Cal.App.2d, 308, 315-316.)

2. Business and Professions Code section 2307, subdivision (e), provides that in considering a petition for reinstatement or modification of penalty, "all activities of the petitioner since the disciplinary action was taken, the offense for which the petitioner was disciplined, the petitioner's activities during the time the certificate was in good standing and the petitioner's rehabilitative efforts, general reputation for truth, and professional ability" may be considered.

Similar rehabilitation criteria are found at California Code of Regulations, title 16, section 1657, which provides that when considering a petition for reinstatement or modification of penalty, the Board shall consider the nature and severity of the acts or crimes; evidence of subsequent acts or crimes; the time that has elapsed since the commission of the acts or crimes; the extent to which petitioner has complied with probation; petitioner's professional activities, abilities, and general reputation for truth; and other evidence of rehabilitation.

Determination of issue

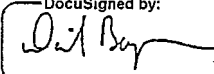
3. The above-described criteria have been used to determine the outcome of petitioner's request for penalty relief. At the outset, it is noted that petitioner's DUI was very serious in that she drove with a blood alcohol level at nearly three times the legal limit while six minors were passengers in her car. It is found, however, by reason of the matters set forth in Factual Findings 5 through 20, that petitioner has demonstrated she is rehabilitated and that it would not be against the public interest to grant her petition to terminate probation. The factors considered in making this determination include the following: Petitioner is deeply remorseful for her conduct, and following her offense, participated in a variety of activities to address her alcoholism and ensure her continued sobriety. She presented ample evidence of her solid and ongoing commitment to her sobriety. It has been over five and one-half years since she became sober, and during this time, petitioner gained tremendous insight into the factors that led to her drinking. She left her abusive husband; she participated in a residential substance abuse program; she consistently attends AA meetings; she has undergone urine testing since August 2013, with negative results; and she participates in individual therapy to support her sobriety and maintain mental health. Petitioner performed so well on probation in her criminal matter that her probation officer supported her request to modify her formal probation to court probation. Petitioner has also been a model probationer to the Board. Notably, she was deemed to be safe to practice by PACE in November 2014, and in September 2016, the Board's Probation Unit terminated her therapy requirement on the recommendation of her psychiatrist. She has complied with every probation condition and continues to attend weekly therapy sessions even though she is not required to do so. The evidence also established that petitioner is a highly skilled and well-respected physician and is regarded as an asset to SCVMC. Termination of petitioner's probation will allow her to more fully serve her patients and pursue her passion of teaching residents.

Insofar as petitioner amply demonstrated that she is rehabilitated, and in light of her excellent reputation as a geriatric practitioner, public protection will not be imperiled by fully restoring petitioner's Certificate. Good cause exists to terminate petitioner's probation.

ORDER

The petition for termination of probation, filed by petitioner Malina B. Madanahalli, M.D., is granted, and Physician's and Surgeon's Certificate No. A 63947 is fully restored.

DATED: February 21, 2019

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For DIANE SCHNEIDER
Administrative Law Judge
Office of Administrative Hearings